	Com	Complete if Known		
	Application Number			
FEE TRANSMITTAL	Filing Date			
	First Named Inventor	Carlos R. Plata-Salaman et al.		
	Group Art Unit			
	Examiner Name			
	Attornov Docket Number	OPT-1578		

## **FEE CALCULATION**

#### **CLAIMS AS FILED**

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$740.00
TOTAL CLAIMS	27- 20 =	7	x 18.00	\$126.00
INDEPENDENT CLAIMS	2- 3 =	0	x 80.00	\$ 0.00
MULTIPLE DEPENDENT CLAIMS		N/A	\$270.00	
			TOTAL FEES	\$ 886.00

## **METHOD OF PAYMENT**

- Please charge Deposit Account No. 10-0750/ORT-1578/ECC in the amount of \$886.00. Three copies of this sheet are enclosed.
- ☐ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filling of this communication, or credit any overpayment, to Account No. 10-0750/ORT-1578/ECC. Three copies of this sheet are enclosed.

SUBMITTED BY:			Complete (if applicable)	
Typed or Printed Name	Ellen Cigmbrone Coletti			Reg. No. 34,140
Signature	Elle (I)	Date:	2/21/02	Deposit Account No. 10-0750

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Carlos R. Plata-Salaman; Boyu Zhao; and Roy E.

Twyman

For : CARBAMATE COMPOUNDS FOR USE IN THE TREATMENT OF PAIN

#### Express Mail Certificate

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Date of Deposit: February 21, 2002

I hereby certify that this complete nonprovisional application, including specification pages, claims, Declaration and Power of Attorney, preliminary amendment and a transmittal letter, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

A Combined Declaration and Power of Attorney will be submitted to the United States Patent and Trademark Office upon receipt of the U.S. Serial Number for this patent application.

Karen Hall-Morgan
(Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper or fee)